



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid 10.00
CR# 2888
Date 4-22-96

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name ROBERT L. FOSTER Home Tel: (360) 425-0585
Mailing Address 125 DUNCAN ROAD Work Tel: (NONE)
City KELSO State WA Zip +4 98626 + 9626 FAX: (NONE)

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name _____ Home Tel: (____) ____ - ____
Mailing Address _____ Work Tel: (____) ____ - ____
City _____ State _____ Zip +4 _____ + _____ FAX: (____) ____ - ____
Relationship to applicant _____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than FIFTEEN (15) ^{THIS IS MAXIMUM PUMP CAPACITY} (☒ gallons per minute or
☐ cubic feet per second) from a ☒ surface water source or ☐ ground water source (check only one) for the
purpose(s) of WATERING FLOWERS & LAWN IN THE SUMMER. Attach a "legal"
description of the place of use. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: WATER FOR FLOWER, SHRUBS
& SOME LAWN WATERING FROM JUNE UNTIL SEPTEMBER - DURING DRY SEASONS

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be
needed:

From ____ / ____ / ____ to ____ / ____ / ____

Section 4. WATER SOURCE

| If SURFACE WATER | If GROUNDWATER |
|---|--|
| Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: <u>OWL CREEK</u> | A permit is desired for _____ well(s). |
| Number of diversions: <u>ONE (1)</u> | |
| Source flows into (name of body of water): <u>COLUMBIA RIVER</u> | Size & depth of well(s): |

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

SEE ATTACHED MAP

| ¼ of | ¼ of | Section | Township | Range(E/W) | County | If location of source is platted, complete below: | | |
|------|------------|-----------|-----------|------------|----------------|---|-------|-------------|
| | | | | | | Lot | Block | Subdivision |
| | <u>E ½</u> | <u>17</u> | <u>7N</u> | <u>1W</u> | <u>COWLITZ</u> | | | |
| | | | | | | | | |

For Ecology Use Date Received: 4/22/96 Priority Date: 4/22/96
SEPA: Exempt/Not Exempt Exempt FERC License # _____ Dept. Of Health # _____
Date Accepted As Complete 5/2/96 By JP Date Returned _____ By _____ WRIA: 26

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: N/A
- B. Briefly describe your proposed water system. (See instructions.) Will use a 1/2 horse power MEYERS PUMP WITH 1 1/2" DIA SUCTION PIPE SET INTO CREEK (HAS SCREEN & FOOT VALVE). Will ATTACH ONE (1) 5/8" DIA. GARDEN HOSE DIRECTLY TO PUMP TO WATER FLOWERS SHRUBS & SOME LAWN DURING DRY SEASON. PUMP WILL BE PLUGGED IN ONLY WHILE WATERING. WATER FLOW WILL BE CONTROLLED BY A VALVE AT THE NOZZLE ON THE WATERING HOSE. ACTUAL USAGE WILL BE ABOUT 2.5 TO 5.0 GALS PER MINUTE UP TO ONE (1) HOUR PER DAY ON THOSE DAYS THAT WATERING IS REQUIRED
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☐ NO
PROVIDE DOCUMENTATION. I DO NOT KNOW OF ANY WATER RIGHTS FOR WELL FOR DOMESTIC HOUSE WATER THAT EXISTED AT TIME OF PURCHASE THIS WELL DOES NOT HAVE THE CAPACITY TO DO OUTSIDE WATERING
- ## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION
- (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: _____ Type of connection _____ (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION

(Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 0.33 (1/3 OF AN ACRE)
- B. List total number of acres for other specified agricultural uses:
TOTAL OWNED PROPERTY IS 2 ACRES 1.66 ACRES LAYS DORMANT (NOT USED)
Use _____ Acres _____
Use _____ Acres _____
Use _____ Acres _____
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO
If yes, enter permit no: _____
- E. Farm uses: N/A
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

GO TO EXIT 36 ON HIGHWAY I-5 TAKE CARROLLS ROAD (OLD 99)
TO ROSE VALLEY ROAD GO 2 MILES TO H & I GROCERY STORE
(BP GAS STATION) TURN RT ON FISHPOND ROAD GO APPROX 1/4 MILE
TO CREEK CROSSING TURN LEFT ON DUNCAN ROAD 2ND HOUSE ON

Section 10. REQUIRED MAP *RIGHT - (125 DUNCAN)*

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Salvador L. Foster
Applicant (or authorized representative)

Date April 19, 1996

SAME
Landowner for place of use (if same as applicant, write "same")

Date _____

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

| | |
|---|--|
| We are returning your application for the following reason(s): | |
| _____ Examination fee was not enclosed | APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210 |
| _____ Section number(s) _____ is/are incomplete | APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE |
| Explanation: | |
| Please provide the additional information requested above and return your application by _____ _____ (date). | |

Ecology staff _____ Date _____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).